

CANDIDATE'S SPECIAL REPORT

(to be filed by a candidate or his principal campaign committee)

This form is filed during the 20 day period immediately preceding an election to report (1) all receipts from a single source in excess of \$500 by major office candidates, or in excess of \$250 by district or any other office candidates, and/or (2) any payments exceeding \$200 to any person who endorses candidates and who is required to file campaign finance disclosure reports.

All candidates who have had any such transactions within the 20 days immediately preceding an election are required to report any such transaction on this form within 48 hours of the time the transaction occurred.

Hand deliver or mail to: CAMPAIGN FINANCE, 8401 United Plaza Blvd., Suite 200, Baton Rouge, LA 70809-7017

1. Qualifying Name and Address of Candidate SUZANNE MAYFIELD KRUEGER P.O. BOX 749 SLIDELL, LA 70459	2. Office Sought (Include title of office as well as parish, city, town and/or election district) STATE REPRESENTATIVE ST. TIBURNO PARISH DISTRICT 76	OFFICE USE ONLY Spec 10/99 4/15
3. Name and address of principal campaign committee (Applicable only if candidate has a principal campaign committee)		Missing numbered pages were blank and had no information on them.
4. Date of Election NOVEMBER 20, 1999		
Primary	General <input checked="" type="checkbox"/>	(Check one)
5. a. Name of Person Preparing Report REGINAWDA DRESSETTE, III		
b. Daytime Telephone (504) 885-9990		

6. WE HEREBY CERTIFY that the information contained in this report and the attached schedules is true and correct to the best of our knowledge, information and belief, and that no election day expenditures have been made that have not been reported herein, and that no information required to be reported by the Louisiana Campaign Finance Disclosure Act has been deliberately omitted.

This 15 day of NOVEMBER, 1999.

Signature of Candidate/Chairperson (To be signed by Chairperson or only report by principal campaign committee)

Signature of Treasurer

504-641-0106
Daytime Telephone Number

504- 885-9990
Daytime Telephone Number

SCHEDULE A: CONTRIBUTIONS (Including In-Kind Contributions)

MAJOR OFFICE CANDIDATES: The following information must be reported for all contributions and in-kind contributions exceeding \$500 received during the last 20 days before the primary election, as well as those received in the last 20 days before the general election if the candidate participates in the general election.

DISTRICT OFFICE CANDIDATES AND ANY OTHER OFFICE CANDIDATES: The following information must be reported for all contributions and in-kind contributions exceeding \$250 received during the last 20 days before the primary election, as well as those received in the last 20 days before the general election if the candidate participates in the general election.

1. Name and Address of Contributor (& description if in-kind)	2. Contributions this Reporting Period a. Date(s)	3. Valuation If In-Kind
SEAPAC 6712 HWY. 23 BELLE CHASE, LA 70037	11/18/99	\$500.00
LAMPAC- LOUISIANA MEDICAL POLITICAL ACTION COMMITTEE 6767 PERINSONS ROAD BATON ROUGE, LA 70808-4268	11/18/99	\$1,500.00

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SCHEDULE B: LOANS RECEIVED

MAJOR OFFICE CANDIDATES: The following information must be reported for all loans of more than \$500 received during the last 20 days before the primary election, as well as those received in the last 20 days before the general election if the candidate participates in the general election.

DISTRICT OFFICE CANDIDATES AND ANY OTHER OFFICE CANDIDATES: The following information must be reported for all loans

* of more than \$250 received during the last 20 days before the primary election, as well as those received in the last 20 days before the general election if the candidate participates in the general election.

1. Name and address of lender SUZANNE M. KRIEGER 39266 MAYFAIR DRIVE SLIDELL, LA. 70481	2. a. Date <u>11/05/09</u> b. Interest rate _____ % (a.p.r.) c. Amount borrowed..... <u>\$ 5,000.00</u> d. Balance due
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3. Endorsers/Guarantors (Enter the full name and address of each person or entity that has endorsed, guaranteed or otherwise secured the loan or line of credit. Additionally, state the amount of liability for any endorser or guarantor whose liability is less than the entire amount borrowed.)

1. Name and address of lender	2. a. Date b. Interest rate % (a.p.r.) c. Amount borrowed..... \$ d. Balance due
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3. Endorsers/Guarantors (Enter the full name and address of each person or entity that has endorsed, guaranteed or otherwise secured the loan or line of credit. Additionally, state the amount of liability for any endorser or guarantor whose liability is less than the entire amount borrowed.)

1. Name and address of lender	2. a. Date b. Interest rate % (a.p.r.) c. Amount borrowed..... \$ d. Balance due
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3. Endorsers/Guarantors (Enter the full name and address of each person or entity that has endorsed, guaranteed or otherwise secured the loan or line of credit. Additionally, state the amount of liability for any endorser or guarantor whose liability is less than the entire amount borrowed.)